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### MASTER PLAN APPLICATION

# APPLICATION FOR AMENDMENT TO PLAN FOR THE 21ST CENTURY: NEW ORLEANS 2030 (THE MASTER PLAN)

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Purpose: The Master Plan is a long-term vision for the future of New Orleans. It contains policy recommendations across a spectrum of topics, but with a particular focus on the built environment. Amendments reflecting updated information, changing trends, best practices, or community goals are generally either text changes or revisions to the Future Land Use Map (FLUM). Text amendments affect the policies of the comprehensive plan on a City-wide level. Map amendments influence the potential uses and development of specific properties. A FLUM amendment may affect a site's zoning designation when zoning is revised comprehensively or when a zoning change application is submitted. Text and map amendments must be consistent with the overall policy intent of the Master Plan. Justification for the change(s) within the context of the Master Plan is the responsibility of the applicant.

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#### REQUIRED COMPONENTS

- Completed application form
- · Reasons for change may address the following criteria:
  - · Public benefits from the proposed change
  - · Health, safety & welfare
  - Evaluation of current public policy
  - · Other factors
- FEE: \$1,500 (Only applies to Descriptions of Future Land Use Categories of Ch.14, Sec.C)

Accepted forms of payment include check, cashier's check, money order, Visa, MasterCard, & Discover.

### Amendment to Text of Master Plan Amendment to Future Land Use Map

- Completed application form (must be the property owner)
- Neighborhood Participation Program Report (see NPP Resource Guide)
- Reasons for change may address the following criteria:
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  - Impacts on neighboring property
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  - · Public benefits from the proposed change
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- · Photographs of subject site
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Lots 0-4,999 sq ft \$1,000 Lots 25,000-74,999 sq ft \$3,000 Lots 5,000-24,999 sq ft \$2,000 Lots 75,000 sq ft or more \$4,000

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Planning District





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# MASTER PLAN APPLICATION

REQUESTS OPEN TO ALL R		MASTER PLAN	
as well as the page numb should be underlined; pro	per of the amendement the oposed deletions from the her than the Future Land	nat the applicant wishes to ch e text should be indicated by	he applicant must provide the chapter ange. Proposed additions to the text strikethrough. If the change is for a me, chapter, and page number along
Volume 3	Chapter(s)5	Page No(s) 5.24	Title(s) Long-Term Housing
Attach a copy of current	graphic, table, or map, if	f applicable.	
Specific proposed change	e to text (if necessary, app	plicant may submit additional	sheets):
though new mixed-inco Warehouse District and were early indicators o developed to encourage	ome multifamily develond projects like the Amer of this market. In addition additional density in a	opments are beginning to be rican Can adaptive reuse pro on to multi-family rental dev appropriate neighborhoods a	e multi-family rental developments, scome available. The success of the oject in the 1990s and early 2000s velopments, strategies should be zoned for single-family and v" suites within an accessory
REQUEST FOR CH.		LAND USE MAP	
should indicate the prese If more than one category	nt Future Land Use Map o y is being requested, prec	designation and the designati cise boundaries of each reque	nap of the boundaries. The request on that is being requested for the area sted land use designation must be equested change must be included in
Boundaries of Area (A se	parate applicaton is need	ed for each non-contiguous p	property)
Municipal Address(es)			

Square Number(s) \_\_\_\_\_ Lot Number(s) \_\_\_\_ Tax Bill Number(s) Square footage of area Future Land Use Map Designation (current status) Proposed Future Land Use Map Designation\_\_\_\_\_







Date	
Tracking Number	

### APPLICANT INFORMATION FOR AMENDMENTS TO THE MASTER PLAN

Applicant Type:		Opublic official/agency		Oproperty owner	Oother		
Applicant Name (and org. name if applicable) Alexander Adamick, Adamick Architecture							
Address 1138 Oret	tha Castle Haley	Blvd.					
City New Orleans		State LA	Zip_701	18			
Phone (504) 322-1			ail address _alec@adan	nickarchitecture.com	n		
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (ar	nd org. name if ap	plicable)					
Address							
		State	Zip				
			ail address				
					nna maartaminin si nooman Aram armanin sammala soosaanaa		
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (an	nd org. name if ap	plicable)					
Address					<del></del>		
		State	Zip				
Phone		Ema	ail address				
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Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (an	id org. name if app	plicable)					
Address		- The Bouleton of the Control of the					
		State	Zip				
Phone		Ema	ail address				
					oran v naračna pom rene pravina kome, ma v zeminem		
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (an	d org. name if app	olicable)			·		
Address							
City			Zip_				
Phone		Ema	ail address				



City	Planning
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Applicant Signature	Date	8/3/2016
Applicant Signature	Date	
(Notarization is only required for application subject to a fee.) STATE OF LOUISIANA, PARISH OF ORLEANS		
Before me, the undersigned authority, personally appeared the full age of majority, who declared under oath to me, No the property described above, and that their signatures we qualified to sign.	otary, that they are the	e owners or authorized agents of
Sworn and subscribed before me this	day of	20
My Commission Expires		





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Lots 25,000-74,999 sq ft

\$3,000

Lots 5,000-24,999 sq ft \$2,000

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\$4,000

#### TO BE COMPLETED BY CPC STAFF

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Square footage of area

			The state of the s
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as well as the page num should be underlined; p	nber of the amendemen proposed deletions from other than the Future La	It that the applicant wishes to ch the text should be indicated by	he applicant must provide the chapter ange. Proposed additions to the text strikethrough. If the change is for a me, chapter, and page number along
Volume <sup>2</sup>	Chapter(s) <sup>5</sup>	Page No(s) 5.14	Title(s) Summary
Attach a copy of currer			
Specific proposed chan	ge to text (if necessary,	applicant may submit additional	sheets):
<ul><li>2. Preserve the diversetc.)</li><li>3. Explore zoning opt</li></ul>	r a wide range of mark tity of housing types values for accessory dwarket rate housing u	ket rate housing choices.  within New Orleans Neighborh  welling units ("in law" suites within appropriate neighborho	noods (singles, doubles, multi-family, ithin an acceessry structure) to oods. WHO: CPC and City Council;
REQUEST FOR CI		RE LAND USE MAP	
should indicate the pres If more than one catego	sent Future Land Use M ory is being requested, p	ap designation and the designati precise boundaries of each reque	map of the boundaries. The request ion that is being requested for the area. ested land use designation must be equested change must be included in
Boundaries of Area (A s	separate applicaton is n	eeded for each non-contiguous p	property)
The transfer and the second se	The state of the s		
			, vinitia
Municipal Address(es)_			
,	·		
0 N 1 1			
Square Number(s)	A CONTRACTOR OF SERVICE STATE OF SERVICES	Lot Number(s)	
TOY DILL MOUNDER(2)			

Future Land Use Map Designation (current status)

Proposed Future Land Use Map Designation



City Planning	
Commission	

Date	
Tracking Number	

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Applicant Type:		Opublic official/agency		Oproperty owner	Oother
Applicant Name (a	e (and org. name if applicable)_Alexander		nick, Adamick Archite	ecture	
Address 1139 Ord					
City New Orleans	S	State LA	<sub>Zip</sub> 701	18	
Phone (504) 322	-1220	Em.	ail address <u>alec@adan</u>	nickarchitecture.com	n
					The Control of Maria and State and Control of State
Applicant Type:		Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Applicant Name (a	and org. name if ap	pplicable)			
Address					
		State	Zip		
Phone		Em	ail address		
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Applicant Name (a	and org. name if ap	plicable)			
Address					
		_ State	Zip		
Phone		Ema	ail address		
	_				
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Applicant Name (a	and org. name if ap	plicable)			
Address			4	Name of the second seco	
		State	Zip		
Phone		Ema	ail address		
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Applicant Name (a	nd org. name if ap	plicable)			
Address			VI		
City		State	Zip		
Phone	-	Ema	ail address		



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Applicant Signature M A	Date	1/2016	
Applicant Signature	Date		
(Notarization is only required for application subject to a fee.)  STATE OF LOUISIANA, PARISH OF ORLEANS			
Before me, the undersigned authority, personally appeare the full age of majority, who declared under oath to me, Nother property described above, and that their signatures we qualified to sign.  Sworn and subscribed before me this	lotary, that they are the ow ere executed freely and vo	ners or authorized luntarily and that tl	agents of ney are duly
My Commission Expires	_	e de la companya de	
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Date 8/5/2016
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. . . . . .

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#### TO BE COMPLETED BY CPC STAFF

Intake Plannner	Date Recieved
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Tracking Number	

# DECLIECT FOR CHANCE IN TEXT OF MACTER DUANT

REQUESTS OPEN TO ALL RES	- · · · · · · · - · · · · - · · · · · ·	MASTER PLAN	
as well as the page number should be underlined; prop	r of the amendement t osed deletions from th r than the Future Lanc	hat the applicant wishes to cha ne text should be indicated by s	ne applicant must provide the chapter ange. Proposed additions to the text strikethrough. If the change is for a me, chapter, and page number along
Volume 3	Chapter(s) 9	Page No(s) 38	Title(s) Enhancing Prosperity
Attach a copy of current g	aphic, table, or map,	if applicable.	
Specific proposed change t	o text (if necessary, ar	oplicant may submit additional	sheets):
historic buildings, taller l	buildings where appr		ights, to promote rehabilitation of gement, the waiving of servitude are and retail planning.

# REQUEST FOR CHANGE TO FUTURE LAND USE MAP

MAY BE REQUESTED BY OWNER OF PROPERTY(S)

For a change to a Future Land Use Map, there must be a clear description and map of the boundaries. The request should indicate the present Future Land Use Map designation and the designation that is being requested for the area. If more than one category is being requested, precise boundaries of each requested land use designation must be described and indicated on maps. A statement describing the reasons for the requested change must be included in the application.

boundaries of Area (A separate app	nicatori is needed	nor each non-contiguous p	roperty)	
		· · · · · · · · · · · · · · · · · · ·		
Municipal Address(es)				
en de la companya de		and the second s	and the second s	
Square Number(s)		Lot Number(s)		
Tax Bill Number(s)		<del>-</del>		
Square footage of area			÷	
Future Land Use Map Designation (	current status)			
Proposed Future Land Use Map De.	signation			







Date	
Tracking Number	

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Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	<b>⊘</b> other
Applicant Name (a	nd org. name if ap	oplicable) Alexander Ada	mick		
Address 1139 Ore					
City New Orleans		State LA	Zip 70:	113	
Phone 504-322-12	220		ail address alec@adar		n
vivir in the second and a second seco					
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Applicant Name (a	nd org. name if ap	pplicable)			
Address					
		State	Zip		
			ail address		
Applicant Name (a	nd org. name if ap	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Address					
City		State	Zip		
Phone		Em	ail address		
Applicant Type: Applicant Name (ar		Opublic official/agency	Oindividual citizen	Oproperty owner	Oother
Address					
City			Zip		
Phone		Emo	ail address		
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Applicant Signature MW	Date	8/3/206
Applicant Signature	Date	•
(Notarization is only required for application subject to a fee.) STATE OF LOUISIANA, PARISH OF ORLEANS		
Before me, the undersigned authority, personally appeared the full age of majority, who declared under oath to me, No the property described above, and that their signatures we qualified to sign.	tary, that they are t	the owners or authorized agents of
Sworn and subscribed before me this	day of	20





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Amount Received	Planning District



Tax Bill Number(s) Square footage of area

Proposed Future Land Use Map Designation

City	Planning
Cor	nmission



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Tracking Number	

# MASTER PLAN APPLICATION

# REQUEST FOR CHANGE IN TEXT OF MASTER PLAN REQUESTS OPEN TO ALL RESIDENTS For text amendment changes, including changes to graphics, tables, or maps, the applicant must provide the chapter as well as the page number of the amendement that the applicant wishes to change. Proposed additions to the text should be underlined; proposed deletions from the text should be indicated by strikethrough. If the change is for a graphic, table, or map other than the Future Land Use Map(s), indicate the volume, chapter, and page number along with the title of the graphic, table, or map. Chapter(s) 9 Page No(s) 13 Title(s) Enhancing Prosperity Volume<sup>2</sup> Attach a copy of current graphic, table, or map, if applicable. Specific proposed change to text (if necessary, applicant may submit additional sheets): 6. Continue to market tax credits and other incentives to property owners such as the waiving of servitude fees with respect to existing awnings and stairs. REQUEST FOR CHANGE TO FUTURE LAND USE MAP MAY BE REQUESTED BY OWNER OF PROPERTY(S) For a change to a Future Land Use Map, there must be a clear description and map of the boundaries. The request should indicate the present Future Land Use Map designation and the designation that is being requested for the area. If more than one category is being requested, precise boundaries of each requested land use designation must be described and indicated on maps. A statement describing the reasons for the requested change must be included in the application. Boundaries of Area (A separate applicaton is needed for each non-contiguous property) Municipal Address(es)

Square Number(s) Lot Number(s)

Future Land Use Map Designation (current status)



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Commission	วท



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# APPLICANT INFORMATION FOR AMENDMENTS TO THE MASTER PLAN

Applicant Type:		Opublic official/agency	Oindividual citizen	Oproperty owner	<b>⊘</b> other		
Applicant Name (a	and org. name if ar	oplicable) Alexander Ada	mick				
	etha Castle Haley						
City New Orleans		State LA Zip 70113					
Phone 504-322-	1220		Email address alec@adamickarchitecture.com				
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
	· ·	oplicable)			Collici		
Address							
City		State	Zip				
City         State         Zip           Phone         Email address							
Applicant Type:	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (a	and org. name if ap	pplicable)					
Address		***					
		State					
Phone		Ema	ail address				
Applicant Type: Applicant Name (a	Oorganization and org. name if ap	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Address							
CityS			Zip				
PhoneEmail address			and the contract of the contra				
	Oorganization	Opublic official/agency	Oindividual citizen	Oproperty owner	Oother		
Applicant Name (a	and org. name ir ap	pplicable)					
Address City		Stato	7:~				
Phone		<del></del>	Zip ail address				
		E1110					







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#### **ACKNOWLEDGMENTS**

If ownership is joint, each owner must be listed. If multiple squares, then applicants must own not less than 50% of the land for which the amendment is requested. If ownership is a partnership, the Partnership Agreement must be included. If ownership is a corporation, Articles of Incorporation and a Board Resolution authorizing an individual or agent to sign on its behalf. If ownership is an LLC, Articles of Organization and legal documentation authorizing an individual or agent to sign on its behalf must be included. If necessary, applicant may be required to submit proof of ownership documents, such as copies of a recorded act of sale, act of exchange, act of donation, or other documents.

Applicant Signature	Date 8/3/2016
Applicant Signature	Date
(Notarization is only required for application subject to a fee.)	
STATE OF LOUISIANA, PARISH OF ORLEANS	
the full age of majority, who declared under oath to me, I	vere executed freely and voluntarily and that they are duly
My Commission Expires	_
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